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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7
	Chapter 11
	Chapter 12
	Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name	Leon	Theresa	
	Write the name that is on	First name	First name	
	your government-issued picture identification (for	Middle name	Middle name	
	example, your driver's license or passport	Williams Last name	Faulkner Last name	
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)	
2.	All other names you			
	have used in the last 8 years	First name	First name	
	Include your married or maiden names.	Middle name	Middle name	
		Last name	Last name	
		First name	First name	
		Middle name	Middle name	
		Last name	Last name	
3.	Only the last 4 digits of your Social	XXX - XX- 8124	XXX - XX	
	Security number or federal Individual	OR	OR	
	Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-	

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Debtor 1 Leon First Name	Williams Middle Name Last Name	Case number (if known)
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
Identification Numbers (EIN) you have used in the last	Business name	Business name
8 years	Business name	Business name
Include trade names and doing business as names	EIN	EIN
	EIN	EIN
5. Where you live		If Debtor 2 lives at a different address:
	648 E 77th St Floor 1	648 E 77th St FI 1
	Number Street 1st floor	Number Street
	Oktober 00040	Objects
	Chicago Illinois 60619 City State Zip Code	Chicago Illinois 60619 City State Zip Code
	,	
	Cook County	Cook County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	City State Zip Code	City State Zip Code
6. Why you are choosing this district	Check one:	Check one:
to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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Debtor	1 Leon		Williams	Case number (if kno	own)
	First Name	Middle Name	Last Name		
Part 2	Tell the Court Abo	ut Your Bankruptcy Ca	ise		
Ba are	e chapter of the nkruptcy Code you e choosing to file der		lescription of each, see <i>Notice Rec</i>))). Also, go to the top of page 1 an		
8. Ho	w you will pay the	more details about he cashier's check, or may pay with a cred I need to pay the fee Individuals to Pay Y I request that my fee judge may, but is not the official poverty I you choose this opti	how you may pay. Typically, if y money order If your attorney is lit card or check with a pre-print ee in installments. If you choos your Filing Fee in Installments (or ee be waived (You may reques not required to, waive your fee, and line that applies to your family so	rou are paying the submitting you ted address. See this option, sign official Form 103 this option only and may do so on size and you are to submit the second size and you are to see the submitted from the second size and you are to see the submitted from the second s	the clerk's office in your local court for e fee yourself, you may pay with cash, in payment on your behalf, your attorney an and attach the <i>Application for SA</i>). If you are filing for Chapter 7. By law, a lay if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official)
ba	ve you filed for nkruptcy within the it 8 years?	V No. Yes. District District District	Wher Wher	MM / DD / YYYY MM / DD / YYYY	Case number Case number Case number
ca be spo filio you pa	e any bankruptcy ses pending or ing filed by a ouse who is not ng this case with u, or by a business rtner, or by an iliate?	✓ No. Yes. Debtor District Debtor District	<u>W</u> her <u>W</u> her	MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
	you rent your sidence?	✓ No. Go to l			b you want to stay in your residence? St You (Form 101A) and file it with

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Williams Debtor 1 Leon Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Leon Williams Case number (if known)

Middle Name First Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit ✓ I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. Incapacity. I have a mental illness or a mental I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Williams Debtor 1 Leon Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded □ No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Theresa Faulkner /s/ Leon Williams Signature of Debtor 1 Signature of Debtor 2 Executed on _ 3/6/2017 Executed on _ 3/6/2017 MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Leon		Williams	Case number (iii	fknown)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed und	der Chapter 7, 11, 12	2, or 13 of title 11, Unite	nave informed the debtor(s) about ed States Code, and have explained the also certify that I have delivered to the
If you are not	debtor(s) the notice requ	ired by 11 U.S.C. §	342(b) and, in a case in	which § 707(b)(4)(D) applies, certify that I
represented by an	have no knowledge after	r an inquiry that the	information in the sched	dules filed with the petition is incorrect.
attorney, you do not	•	, ,		·
need to file this page.	/s/ Morsheda Hash	em	Date	3/6/2017
	Signature of Attorney f	****	<u>N</u>	MM / DD / YYYY
	,			
	Morsheda Hashem			
	Printed name			
	Semrad Law Firm			
	Firm name			
	11101 S. Western Ave			
	Street	enue		
	Ollect			
	-			
	Chicago		Illinois	60643
	City		State	Zip Code
	- •			P
	Contact phone	3122374973	Email address	mhashem@semradlaw.com
	Bar number		State	

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Fill in this information to identify your case:							
Debtor 1	Leon		Williams				
	First Name	Middle Name	Last Name				
Debtor 2	Theresa		Faulkner				
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		Northern	District of Illinois (State)				
Case number (If known)			(Oldio)				

Check if this is an
amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	·
1b. Copy line 62, Total personal property, from Schedule A/B	\$25,155.00 ——————————————————————————————————
1c. Copy line 63, Total of all property on Schedule A/B	\$25,155.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$24,552.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$73,071.33
Your total liabilities	\$97,623.33
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	\$3,376.45
5. Schedule J: Your Expenses (Official Form 106J)	\$3,368.00
	ψο,ουυ.υυ

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Deb	tor 1 Leon		Williams	Case number (if known)				
Part -	First Name 4: Answer These Q	Middle Name uestions for Administra	Last Name tive and Statistical Reco	ords				
6. A		to report on this part of the fo		nit this form to the court with your other so	hedules.			
_	family, or household p Your debts are not p	arily consumer debts. Consumpose. 11 U.S.C. § 101(8).	Fill out lines 8-10 for statistica	by an individual primarily for a personal, I purposes. 28 U.S.C. § 159. this part of the form. Check this box and su	ubmit			
	3. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$5,639.38							
9.	Copy the following spe	cial categories of claims fro	om Part 4, line 6 of Schedul	e E/F:				
	From Part 4 on Schedu	le E/F, copy the following:		Total claim				
	9a. Domestic support ob	ligations (Copy line 6a.)		\$0.00				
	9b. Taxes and certain oth	ner debts you owe the govern	ment. (Copy line 6b.)	\$0.00				
	9c. Claims for death or p	ersonal injury while you were	intoxicated. (Copy line 6c.)	\$0.00				
	9d. Student loans. (Copy	/ line 6f.)		\$37,591.00				
	9e. Obligations arising or priority claims. (Copy line		or divorce that you did not rep	oort as \$0.00				
	9f. Debts to pension or p	profit-sharing plans, and other	similar debts. (Copy line 6h.)	\$0.00				

\$37,591.00

9g. Total. Add lines 9a through 9f.

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				,	Document 1 age 10 of	173		
Fill in this	information to	identify your ca	ase:					
Debtor 1	Leon First Na	me	Middle N	lame	Williams Last Name			
Debtor 2 (Spouse, if fil	Theresa First Na		Middle N	lame	Faulkner Last Name			
United Sta	ates Bankrupto	/ Court for the:	Northern		District of Illinois (State)			
Case num (If known)	ber				(State)			_
Officia	ıl Form 1	06A/B						Check if this is an amended filing
Sche	dule A/E	3: Prope	rty					12/1
category v responsibl write your	where you thing e for supplying name and ca	nk it fits best. B g correct inform se number (if k	e as complete au nation. If more sp nown). Answer ev	nd a pace very	n asset only once. If an asset fits in a ccurate as possible. If two married p is needed, attach a separate sheet question. or Other Real Estate You Own o	people are t to this fo	e filing together, both a orm. On the top of any a	re equally
1. Do you	own or have	any legal or eq	uitable interest i	in an	y residence, building, land, or simila	ar propert	y?	
✓ □	No. Go to Par Yes. Where is	t 2			,	ш рторот	•	
1.1	Street address	, if available, or o	other description	Wh	at is the property? Check all that app Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	bly.	the amount of any secu	claims or exemptions. Put red claims on Schedule D: ims Secured by Property. Current value of the portion you own?
	Number	Street			Land Investment property Timeshare		Describe the nature of interest (such as fee sthe entireties, or a life	imple, tenancy by
	City	State	Zip Code	Wh one	Other		Check if this is co (see instructions)	mmunity property
16		P.	I. I		her information you wish to add abo perty identification number:	out this ite	m, such as local	
1.2	Street address		other description	Wh	at is the property? Check all that app Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	bly.	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D: ims Secured by Property.</i> Current value of the portion you own?
	Number	State	Zip Code	Ë	Investment property Timeshare Other		Describe the nature of interest (such as fee sthe entireties, or a life	imple, tenancy by
				one	no has an interest in the property? Const. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add aboomers;	er	(see instructions)	mmunity property

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Debtor 1	Leon First Name	Middle Name	Williams Last Name	Case number	(if known)	
	et address, if available, or ot		What is the property? Check all that a Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	арріу.	the amount of any secu	
City	State	[] [] [] 0	Timeshare Other Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and	other	Check if this is co (see instructions)	
	the dollar value of the po ve attached for Part 1. Wi	rtion you own for a rite that number he		ding any entries	s for pages	
Do you ow you own t	hat someone else drives. If y ans, trucks, tractors, sport ut	equitable interest you lease a vehicle, a	in any vehicles, whether they are a also report it on Schedule G: Executor cycles	-	-	
3.1	Make Model: Year: Approximate mileage: Other information: 2013 Honda Crosstour	Honda Crosstour 2013 20000	Who has an interest in the propone. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and		the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$16125.00
3.2	Make Model: Year: Approximate mileage: Other information:	Dodge Magnum 2005 90000	Check if this is community prinstructions) Who has an interest in the propone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	property (see	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$3475.00
	2005 Dodge Magnum		At least one of the debtors and Check if this is community processing the community process.		ψ 5 47 5 .00	<u> </u>

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Debtor 1			Williams	Case number	(if known)	
	First Name	Middle Name	Last Name			
3.3	Make Model: Year: Approximate mileage: Other information: 1993 Toyota Camry	Toyota Camry 1993 175000	Who has an interest in the prone. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors at the community of the commu	and another	the amount of any secu	claims or exemptions. Put red claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$939.00
3.4	Make Model: Year:	Honda Accord 2004	who has an interest in the proone. Debtor 1 only	operty? Check	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property.
	Approximate mileage: Other information: 2004 Honda Accord	200000	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a	and another	Current value of the entire property? \$2075.00	Current value of the portion you own? \$2075.00
Exar			Check if this is community instructions) r recreational vehicles, other verifishing vessels, snowmobiles, mo	ehicles, and acce		
4.1	Make Model: Year:		Who has an interest in the proone.	operty? Check	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a	and another	Current value of the entire property?	Current value of the portion you own?
			Check if this is communit instructions)			
4.2	Make Model: Year: Approximate mileage:		Who has an interest in the proone. Debtor 1 only Debtor 2 only	the amount of any secured cl Creditors Who Have Claims S		red claims on Schedule D: ims Secured by Property. Current value of the
	Other information:		Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is community instructions)		entire property?	portion you own?
			l of your entries from Part 2, inc			2614.00

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Williams Debtor 1 Leon Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Misc. Household Goods and Furniture \$400.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Misc. Electronics \$300.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$225.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$925.00 for Part 3. Write that number here

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Williams Debtor 1 Leon Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ Yes \$25.00 Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: Bank of America \$1500.00 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: Bank of America \$91.00 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture % of ownership: Name of entity Yes. Give specific information about

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Deb	tor 1 Leon		Williams	Case number (if known)			
	First Name	Middle Name	Last Name				
20.	20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.						
	✓ No						
	Yes. Give specific information about them	Issuer name:					
21.	Retirement or pension Examples: Interests in IF), thrift savings accoun	ts, or other pension or profit-sharing plans			
	✓ No	T (Leadhailte ann ann an				
	Yes. List each	Type of account:	Institution name:				
	account separately.	401(k) or similar plan:			_		
	copulatory:	Pension plan:					
		IRA:					
		Retirement account:					
		Keogh:			_		
		Additional account:					
		Additional account:			_		
22.		prepayments d deposits you have made so that with landlords, prepaid rent, publi			-		
	companies, or others						
	✓ No		Institution name:				
	Yes	Electric:					
		Gas:			_		
		Heating oil:			_		
		Security deposit on rental unit:					
		Prepaid rent:					
		Telephone:			_		
		Water:					
		Rented furniture:					
		Other:					
23.	Annuities (A contract fo	or a periodic payment of money to	you, either for life or fo	or a number of years)	-		
	✓ No						
	Yes	Issuer name and description:					
	_						
					<u> </u>		
					-		

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Debto	or 1 Leon		e number (if known)	
0.4	First Name	Middle Name Last Name		
24.		n education IRA, in an account in a qualified ABLE program, or under a qua 530(b)(1), 529A(b), and 529(b)(1).	ailined state tuition program.	
	✓ No Yes	Institution name and description. Separately file the records of any interests.11 U.	.S.C. § 521(c):	
25.		able or future interests in property (other than anything listed in line 1), and or your benefit	d rights or powers	
	✓ No Yes. Descri	ribe		
26.		rights, trademarks, trade secrets, and other intellectual property ernet domain names, websites, proceeds from royalties and licensing agreements		
	✓ No	W		
	Yes. Descri	nice		
27.		ichises, and other general intangibles	professional licenses	
	No No	ding permits, exclusive licenses, cooperative association holdings, liquor licenses,	, professional licenses	
	Yes. Descri	ribe		
Mon	ney or propert	ty owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	ney or propert			portion you own? Do not deduct secured
				portion you own? Do not deduct secured claims or exemptions.
	Tax refunds ow ✓ No ✓ Yes. Give sp		Federal:	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds ow ✓ No	ved to you pecific information	State:	portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds ow No Yes. Give sy about you al and the	pecific information t them, including whether dready filed the returns the tax years	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds ow No Yes. Give sy about you al and the Family support Examples: Past of	pecific information t them, including whether liready filed the returns the tax years	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds ow No Yes. Give spabout you al and the Family support Examples: Past of No	pecific information t them, including whether dready filed the returns the tax years	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds ow No Yes. Give spabout you al and the Family support Examples: Past of No	pecific information t them, including whether llready filed the returns he tax years t due or lump sum alimony, spousal support, child support, maintenance, divorce	State: Local: settlement, property settlement	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds ow No Yes. Give spabout you al and the Family support Examples: Past of No	pecific information t them, including whether llready filed the returns he tax years t due or lump sum alimony, spousal support, child support, maintenance, divorce	State: Local: settlement, property settlemer Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds ow No Yes. Give spabout you al and the Family support Examples: Past of No	pecific information t them, including whether llready filed the returns he tax years t due or lump sum alimony, spousal support, child support, maintenance, divorce	State: Local: settlement, property settlemer Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00
28.	Tax refunds ow No Yes. Give sy about you all and the Family support Examples: Past of No Yes. Give sy	pecific information t them, including whether liready filed the returns he tax years t due or lump sum alimony, spousal support, child support, maintenance, divorce	State: Local: settlement, property settlemer Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00
28.	Tax refunds ow ✓ No Yes. Give sy about you al and th Family support Examples: Past of Yes. Give sy Other amounts Examples: Unpage 1	pecific information t them, including whether llready filed the returns he tax years t due or lump sum alimony, spousal support, child support, maintenance, divorce	State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds ow ✓ No Yes. Give sy about you al and th Family support Examples: Past of Yes. Give sy Other amounts Examples: Unpage 1	pecific information It them, including whether Idready filed the returns he tax years It due or lump sum alimony, spousal support, child support, maintenance, divorce specific information	State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds ow ✓ No Yes. Give sy about you al and the Family support Examples: Past of the Yes. Give sy Other amounts Examples: Unpassocial	pecific information It them, including whether Ilready filed the returns he tax years It due or lump sum alimony, spousal support, child support, maintenance, divorce specific information Is someone owes you aid wages, disability insurance payments, disability benefits, sick pay, vacation pay all Security benefits; unpaid loans you made to someone else	State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	or 1 Leon		Williams	Case number (if known)	
	First Name	Middle Nam	e Last Name		
31.	Interests in insurance Examples: Health, disab		ealth savings account (HSA); credit, h	omeowner's, or renter's insurance	
	No Yes. Name the insu of each policy and I		Company name:	Beneficiary:	Surrender or refund value:
32.	If you are the beneficiary property because some	of a living trust, expect	n someone who has died proceeds from a life insurance police	y, or are currently entitled to receive	
33.			you have filed a lawsuit or made surance claims, or rights to sue	a demand for payment	
34.	Other contingent and to set off claims No Yes. Describe	unliquidated claims o	f every nature, including counterd	claims of the debtor and rights	
35.	Any financial assets your No Yes. Describe	ou did not already list			
36.		-	om Part 4, including any entries fo		\$1616.00
Part	_			nterest In. List any real estate in Par	t 1.
37.	No. Go to Part 6. Yes. Go to line 38.	ny legal or equitable in	nterest in any business-related pro		Current value of the portion you own? Do not deduct secured claims or exemptions
38.	Accounts receivable of No Yes. Describe	or commissions you al	ready earned		
39.	Office equipment, furn		e, modems, printers, copiers, fax ma	achines, rugs, telephones, desks, chairs, elec	etronic devices
	Yes. Describe				

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Deb	tor 1 Leon	Williams	Case number (if known)	
1.0	First Name	Middle Name Last Name		
40.	Machinery, fixtures, ed	quipment, supplies you use in business, and tools of your trade		
	✓ No			
	Yes. Describe			
44	Incomplete to the second secon			
41.	Inventory			
	✓ No			
	Yes. Describe			
12	Interests in partnershi	ine or joint ventures		
42.		ps or joint ventures		
	✓ No	Name of entity:	% of ownership:	
	Yes. Give specific	. tamo er emily.	, o o . o	
	information about them			
	arom			
		·		
12	Cuetomor liete mailing	lists, or other compilations		
45.		iists, or other compliations		
	✓ No			
	Yes. Do your lists in	clude personally identifiable information (as defined in 11 U.S.C. § 1	I01(41A))?	
	☐ No			
	Yes. Descr	ibe		
44.	Any business-related	property you did not already list		
	No			
	Yes. Give specific			
	information			
				
		II of your entries from Part 5, including any entries for pages yo r here		
•				
Part		erm- and Commercial Fishing-Related Property You Ov	wn or Have an Interest In.	
	If you own or have an	interest in farmland, list it in Part 1.		
46.	Do you own or have a	ny legal or equitable interest in any farm- or commercial fishin	g-related property?	
	No. Go to Part 7.			t value of the
	Yes. Go to line 47.			you own? deduct secured claims
			or exem	
47.	Farm animals			
	Examples: Livestock, po	oultry, farm-raised fish		
	✓ No			
	Yes. Describe			
	_			

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Debto	or 1 Leon First Name	Middle Name	Williams Last Name	Case number (if known)	
48.	Crops-either grow		Lust Name		
	✓ No				
	Yes. Describe				
49.	Farm and fishing e	equipment, implements, machinery, fixtu	ires, and tools of tr	rade	
	✓ No				
	Yes. Describe				
50	Earm and fishing s	supplies, chemicals, and feed			
30.	No	upplies, cliellicals, and leed			
	Yes. Describe				
	<u> </u>				
51.	Any farm- and con	nmercial fishing-related property you did	d not already list		
	✓ No				
	Yes. Describe				
		of all of your entries from Part 6, includi			
or Pai	rt 6. Write that nur	nber here			
Part 7	Describe All	Property You Own or Have an Inte	rest in That You	Did Not List Above	
		property of any kind you did not already		Did Not List/Boto	
		ickets, country club membership			
	✓ No Yes. Give speci	fic			
	information				
E4 A4	ld the deller velve	of all of varie autoica from Davit 7. White t	hat		
54. AG	id the dollar value	of all of your entries from Part 7. Write t	nat number nere		
	_				
Part 8	List the Total	s of Each Part of this Form			
55. P	art 1: Total real es	tate, line 2		>	
56 p :	art 2 total vehicles	s. line 5	*****		
		al and household items, line 15	\$22614.00		
	art 4: Total financia		\$925.00		
		ss-related property, line 45	\$1616.00		
		and fishing-related property, line 52		<u></u>	
		property not listed, line 54			
	_	erty. Add lines 56 through 61	405455.33		* 05455
		<u> </u>	\$25155.00	Copy personal property total	+ \$25155.00
					\$25155.00
63. Tc	otal of all property	on Schedule A/B. Add line 55 + line 62			

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Fill in this information to identify your case:						
Debtor 1	Leon	Williams				
	First Name	Middle Name	Last Name			
Debtor 2	Theresa		Faulkner			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois			
			(State)			
Case number (If known)						

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	tt 1: Identify the Property You Clair	m as Exempt				
1.	Which set of exemptions are you claim	ing? Check one only, ev	ren if your spouse is filing with you.			
	You are claiming state and federal	nonbankruptcy exemp	otions. 11 U.S.C. § 522(b)(3)			
	You are claiming federal exemption	ns. 11 U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A	N/B that you claim as e	xempt, fill in the information below.			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption		
	Brief description:	\$16,125.00	7	735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)		
	Honda Crosstour, 2013, 2013 Honda Crosstour		100% of fair market value, up to any	_		
	Line from Schedule A/B: 03		applicable statutory limit			
	Brief description:	\$3,475.00	\$1,357.00; \$0.00	735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)		
	2005 Dodge Magnum Line from		100% of fair market value, up to any applicable statutory limit	_		
3.	Are you claiming a homestead exempti (Subject to adjustment on 4/01/19 and ev		375? cases filed on or after the date of adjustment.)			
	No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?					
	□ No □ Yes					

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 Debtor 1 First Name
 Leon
 Williams
 Case number (if known)

 Last Name
 Last Name

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
,,	Copy the value from Schedule A/B		
Brief description: Toyota Camry, 1993,	\$939.00	\$939.00; \$0.00	735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)
1993 Toyota Camry Line from Schedule A/B: 03		100% of fair market value, up to any applicable statutory limit	
Brief description: Honda Accord, 2004, 2004 Honda Accord	\$2,075.00	\$2,075.00; \$0.00 100% of fair market value, up to any	735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)
Line from Schedule A/B: 03		applicable statutory limit	
Brief description: Misc. Household Goods	\$400.00	\$400.00	735 ILCS 5/12-1001(b)
and Furniture Line from Schedule A/B: 06		100% of fair market value, up to any applicable statutory limit	
Brief description: Checking account, Bank	\$1,500.00	\$1,500.00	735 ILCS 5/12-1001(b)
of America Line from Schedule A/B: 17		100% of fair market value, up to any applicable statutory limit	
Brief description: Misc. Electronics	\$300.00	\$300.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 07		100% of fair market value, up to any applicable statutory limit	
Brief description: Used Clothing Line from Schedule A/B: 11	\$225.00	\$225.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
Brief description: Cash on Hand	\$25.00	\$25.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 16		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$91.00	\$91.00	735 ILCS 5/12-1001(b)
Savings account, Bank of America		100% of fair market value, up to any applicable statutory limit	_
Line from Schedule A/B: 17		pp.::000::0 0101015	

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Debtor 1 Leon Williams Lest Name Debtor 2 Thoreon Middle Name Lest Name Thoreon Middle Name Lest Name Thoreon Middle Name Lest Name Debtor 2 Thoreon Middle Name Lest Name Middle Name Lest Name Thoreon Middle Name Lest Name Middle Name Lest Name Middle Name Lest Name Middle Name Mid				<u> </u>	Joannone	- ago 22 or i	·		
Debtor 2 First Name Middle Name Last Name Falkhore Fal	Fill in	this inform	ation to identify your ca	se:					
Debtor 2 Thereish Frat Name Lust N	Debto	or 1	Leon		Williar	ns			
United States Bankuptoy Court for the: Northern	L			Middle Name					
United States Bankruptcy Court for the: Northern District of Binots				Middle Name					
Case number	Linita								
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes Fill all Secured Claims Yes Fill all of the information below.	Office	u States Da	nkruptcy Court for the.	Northern					
Schedule D: Creditors Who Have Claims Secured by Property 12/1 Be as complete and accurate as possible, if two married people are filling together, both are equally responsible for supplying correct information. If more space in endeded, copy the Additional Page, fill if out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Viss. Fill in all of the information below. Part 1: List all secured claims. If a creditor has more than one secured claim, list the other creditor's page analysis for each claim. If more than one secured claim, list the other creditor's page analysis for each claim. If more than one secured claim, list the other creditor's page analysis for each claim. If more than one secured claims in aphabetical order according to the creditor's page analysis for each claim. If more than one creditor has a particular claim, list the other creditor's page analysis for each claim. If more than one creditor has a particular claim, list the other creditor's page analysis for each claim. If more than one secured claims in aphabetical order according to the creditor's page analysis of collecteral.									
Schedule D: Creditors Who Have Claims Secured by Property 12/1 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Part 15			100D					По	heck if this is a
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims It a creditor have no expected in a particular claim, list the creditor spaperably for each claim. If a creditor have no expected in a particular claim, list the creditor shame. Secured Claims It a creditor have no expected in a particular claim, list the creditor shame Secured Claims Se			_						mended filing
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims It a creditor have no expected in a particular claim, list the creditor spaperably for each claim. If a creditor have no expected in a particular claim, list the creditor shame. Secured Claims It a creditor have no expected in a particular claim, list the creditor shame Secured Claims Se	Scl	hedul	e D: Credite	ors Who Ha	ve Clai	ims Secure	ed by Prop	erty	12/1
anne and case number (if known). 1. Do any creditors have claims secured by your property?									mation. If
1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 11 List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor spanarely for each claim. If more than one ereditor has a particular claim, list the other creditor's in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. PALSE AUTO Creditor's Name 900 STEWART AVE As of the date you file, the claim is: Check all that apply. Contingent CARDEN CITY NY 11530 Debtor 1 and Debtor 2 only An agreement you made (such as mortgage or secured an other company) Status of lien. Check all that apply. As of the date you file, the claim is: Check all that apply. Contingent Carditor's Name Carditor				onal Page, fill it out, nu	mber the entr	ies, and attach it to th	nis form. On the top	of any additional page	es, write your
No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below.				ocured by your prope	rtv2				
Ves. Fill in all of the information below.		•			•	er schedules. You have	e nothing else to rep	ort on this form.	
2. List all secured claims. If a creditor has more than one secured claim, list the creditor spearately for each claim. If more than one creditor has a particular claim, list the cher creditors in Part 2. As much as possible, list the claim is alphabetical order according to the creditors on Part 2. As much as possible, list the claims in alphabetical order according to the creditors on Part 2. As much as possible, list the claims in alphabetical order according to the creditors on Part 2. As much as possible, list the claims in alphabetical order according to the creditors on Part 2. As much as possible, list the claim is alphabetical order according to the creditors on Part 2. As much as possible, list the claim is alphabetical order according to the creditors on Part 2. As much as possible, list the claim is alphabetical order according to the creditors on Part 2. As much as possible, list the claim is alphabetical order according to the creditors on Dancet 1 order according to the creditors on Part 2. As much as possible, list the claim is application or part 2. As much as possible, list the claim is claim claim. Chaster Auritic Auri	ı				····a·· you. ou.o		ooug ooo .o . op	0.10.11.11.10.10.11.11	
2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2, As much as possible, list the claims in alphabetical order according to the creditor's name. 2.1 CHASE AUTO Conditions Name Occurred Name				i bolow.					
separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditors value of collateral but a supports this claim. 2:1 CHASE AUTO									
Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. Do not deduct the value of collateral, that supports this claim is alway of collateral. Possible that supports this claim is claim is claim Possible that supports this claim Possible that supports	2.				,				
CHASE AUTO Creditor's Name 900 STEWART AVE Number Street State ZIP Code Who owes the debt? Check one and another Last 4 digits of account number 2500 S2,118.00 S3,475.00 S0,309.00 S1,475.00 S6,309.00 S6,309.00 S1,509.00 S1				The state of the s					
E.1 CHASE AUTO		name.					value of collateral.	• •	If any
Conditions Name Contingent	2 1	CHASE AL	OTL				\$22 434 00		\$6,309,00
Number Street		Creditor's N	ame		y that secures	the claim:	ΨΕΣ, 10 1.00	<u> </u>	Ψ0,000.00
City State zIP Code Who owes the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Debtor 1 only Number Street Miwaukee Wi 53224 City State ZIP Code Who owes the debtors and another Debtor 1 and Debtor 2 only As IT William Relates to a community debt Date debt was and another Street Check one. Miwaukee Wi 53224 City State ZIP Code Who owes the debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Street to a community debt Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check all that apply. Check if this claim relates to a community debt Date debt was a Q1/2014 City State ZIP Code Car loan) Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Check all that apply. Check if this claim relates to a community debt Date debt was Q1/2014 Cother (including a right to offset) Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Q1/2014 Check if this claim relates to a community debt Check all that opply. Check if this claim relates to a community debt Check all that opply. Check if this claim relates to a community debt Check all that opply. Check if this claim relates to a community debt Check all that opply. Check if this claim relates to a community debt Check all that opply. Check if this claim relates to a community debt Check all that opply. Check if this claim relates to a community debt Check all that opply. Check if this claim relates to a community debt Check all that opply. Check if this claim relates to a community debt Check all that opply. Check if this claim relates to a community debt Check all that opply. Check if this claim relates to a community debt Check all that apply. Check if this claim relates to a community debt Check all that apply. Check if this claim relates to a community debt Check all that apply. Check if th		-			e, the claim is	: Check all that apply.			
City State ZIP Code Who owes the debt? Check one. Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check iff this claim relates to a community debt incurred 2.2 WAYS TO WORK INC Creditor's Name 11700 West Lake Park Drive Number Street State ZIP Code Who owes the debt? Check one. Milwauke WI 53224 City State ZIP Code Who owes the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another State ZIP Code Who owes the debt? Check one. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Date of the date you file, the claim is: Check all that apply. Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Statutory lien (such as tax lien, mechanic's lien) Date of the debt was Polt/2014 Other (including a right to offset)				Contingent					
Disputed				Unliquidated					
Debtor 1 only		- ,		Disputed					
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was 8/1/2014 incurred WAYS TO WORK INC Creditor's Name 11700 West Lake Park Drive Number Street Milwaukee Wi 53224 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number 2500 Last 4 digits of account number 2500 Describe the property that secures the claim: \$2,118.00 \$3,475.00 \$0.00 \$3,475.00 \$0.00 \$0.00				Nature of lien. Check	all that apply.				
Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Judgmen			•		made (such as	s mortgage or secured			
Check if this claim relates to a community debt Date debt was incurred Dther (including a right to offset) Last 4 digits of account number 2500			,		n as tax lien, m	echanic's lien)			
to a community debt Date debt was incurred Last 4 digits of account number				Judgment lien from	n a lawsuit				
Date debt was incurred Last 4 digits of account number				Other (including a	right to offset)				
Secrible the property that secures the claim: \$2,118.00 \$3,475.00 \$0.00			-	Last 4 digits of accou	int number	2500			
Creditor's Name 11700 West Lake Park Drive Number Street Milwaukee WI 53224 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Describe the property that secures the claim: 036 Automobile As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Other (including a right to offset)	_			Last 4 digits of accor	int number				
Milwaukee Wi 53224 City State ZIP Code Who owes the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ✓ Check if this claim relates to a community debt Date debt was 9/1/2014	2.2			Describe the propert	y that secures	the claim:	\$2,118.00	\$3,475.00	\$0.00
Milwaukee WI 53224 City State ZIP Code Who owes the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Data debt was 9/1/2014					the eleim is	Chapt all that apply			
Milwaukee WI 53224 City State ZIP Code Who owes the debt? Check one. ✓ Debtor 1 only Nature of lien. Check all that apply. ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt ☐ Other (including a right to offset)		Number	Street		e, the claim is	: Спеск ан тат арріу.			
City State ZIP Code Who owes the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Debtor 2 only Check if this claim relates to a community debt Description: Check if this claim relates to a community debt Description: Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Other (including a right to offset)		Milwauke	e WI 53224	=					
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Debtor 4 only An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Other (including a right to offset)		City	State ZIP Code						
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Data debt was 9/1/2014					all that apply.				
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was 9/1/2014			•	_		s mortgage or secured			
At least one of the debtors and another Check if this claim relates to a community debt Date debt was 9/1/2014		=	•	car loan)	•				
and another Check if this claim relates to a community debt Date debt was 9/1/2014		=	·			echanic's lien)			
to a community debt Date debt was 9/1/2014		and a	nother	=					
Date debt was 9/1/2014				Other (including a	right to offset)				
incurred Last 4 digits of account number 0001		Date deb		Last 4 digits of accor	ınt number	0001			
Add the dollar value of your entries in Column A on this page. Write that number \$24,552.00			Add the dollar value of v	our entries in Column	A on this page	. Write that number	\$24,552.00		

here:

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Fill in this in	nformation to identify your ca	ase:			
Debtor 1	Leon First Name	Middle Name	Williams Last Name	_	
Debtor 2	Theresa		Faulkner		
(Spouse, if filing	ng) First Name	Middle Name	Last Name		
	es Bankruptcy Court for the:	Northern	District of Illinois (State)	_	
Case numb	oer				
Officia	l Form 106E/F				Check if this is an amended filing
Sche	dule E/F: Cre	ditors Who	Have Unsecu	ured Claims	12/1
other party Form 106A claims that	to any executory contracts /B) and on Schedule G: Exe are listed in Schedule D: C	or unexpired leases tha cutory Contracts and Un reditors Who Hold Claim	nt could result in a claim. Als nexpired Leases (Official Forn ns Secured by Property. If mo	so list executory contracts n 106G). Do not include an ore space is needed, copy t	n NONPRIORITY claims. List the on Schedule A/B: Property (Official by creditors with partially secured he Part you need, fill it out, number rite your name and case number (if
Part 1: L	ist All of Your PRIORIT	/ Unsecured Claims			
✓ N	ny creditors have priority un No. Go to Part 2. ⁄es.	secured claims against	you?		
listed,	identify what type of claim it i	s. If a claim has both prior	rity and nonpriority amounts, lis	st that claim here and show b	arately for each claim. For each claim oth priority and nonpriority amounts. ority unsecured claims, fill out the

Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Nonpriority

amount

Total

claim

Priority

amount

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Debte	or 1 Leon	Williams Last Name	Case number (if known)	
Dowl	First Name Middle Name			
[List All of Your NONPRIORITY Unsecure Do any creditors have nonpriority unsecured clair No. You have nothing to report in this part. Su Yes. 	ns against you?	e court with your other schedules.	
4. L	List all of your nonpriority unsecured claims in the unsecured claims, list the creditor separately for each cl	aim. For each claim li	er of the creditor who holds each claim. If a creditor has more isted, identify what type of claim it is. Do not list claims already in Part 3.If you have more than four priority unsecured claims fill out	cluded in Part 1.
				Total claim
4.1	77th St Depo Nonpriority Creditor's Name 210 W 79th St		Last 4 digits of account number 6958 When was the debt incurred? 8/1/2016	\$3,931.00
	Number Street			
			As of the date you file, the claim is: Check all that apply. Contingent	
		0620	Unliquidated	
	,	o Code	Disputed	
	Who incurred the debt? Check one. Debtor 1 only			
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community	debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		Other. Specify 24 InstallmentLoan	
	✓ No			
	Yes			
4.2	77th St Depo		Last 4 digits of account number 6959	\$981.00
	Nonpriority Creditor's Name 210 W 79th St		When was the debt incurred? 9/1/2016	
	Number Street	_		
			As of the date you file, the claim is: Check all that apply. Contingent	
		0620	Unliquidated	
	City State Zi Who incurred the debt? Check one.	o Code	Disputed	
	Debtor 1 only		Type of NONPRIORITY unsecured claim:	
	Debtor 2 only		Student loans	
	Debtor 1 and Debtor 2 only		Obligations arising out of a separation agreement or	
	At least one of the debtors and another		divorce that you did not report as priority claims	
	Check if this claim relates to a community	debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		Other. Specify 12 InstallmentLoan	
	✓ No			
	Yes			
4.3	BANK OF AMERICA		Last 4 digits of account number	\$467.00
	Nonpriority Creditor's Name		Last 4 digits of account number When was the debt incurred? 6/1/2016	
	POB 17054 Number Street			
			As of the date you file, the claim is: Check all that apply.	
	WILMINGTON Delaware 19	9884	Contingent	
	-	o Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only		Disputed The Company of the Company	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	브	dobt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	uent	debts Other. Specify CreditCard	
	✓ No		<u> </u>	
	Yes			

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Part 2	Your NONPRIORITY Unsecured Claims - Continu	ation Page	
	After listing any entries on this page, number them beginning	ng with 4.5, followed by 4.6, and so forth.	Total claim
4.4	BBY/CBNA Nonpriority Creditor's Name PO BOX 6497	Last 4 digits of account number 6667 When was the debt incurred? 7/1/2013	\$199.00
	Number Street	As of the date you file, the claim is: Check all that apply.	
	SIOUX FALLS South Dakota 57117 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify CreditCard	
4.5	CB/ASTEWRT Nonpriority Creditor's Name 220 W SCHROCK RD Number Street COLUMBUS Ohio 43081 City State Zip Code	Last 4 digits of account number 0381 When was the debt incurred? 11/1/2010 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$1,943.00
	Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify <u>CreditCard</u>	
4.6	CHASE CARD Nonpriority Creditor's Name PO BOX 15298 Number Street	Last 4 digits of account number 3513 When was the debt incurred? 6/1/2015 As of the date you file, the claim is: Check all that apply. Contingent	\$4,892.00
	WILMINGTON Delaware 19850 City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt Is the claim subject to offset? □ No □ Yes	Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify CreditCard	

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 Debtor 1 First Name
 Leon
 Williams
 Case number (if known)

 Last Name
 Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page			
	After listing any entries on this page, number them beginning wi	th 4.5, followed by 4.6, and so forth.	Total claim
4.7	CHASE CARD Nonpriority Creditor's Name P.O. BOX 15298	Last 4 digits of account number 0830 When was the debt incurred? 11/1/2012	\$1,154.00
	Number Street	As of the date you file, the claim is: Check all that apply.	
City Who ind Deb Deb At le Is the c	Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify CreditCard	\$500.00
4.8	ComEd Nonpriority Creditor's Name 3 Lincoln Center Number Street Bankruptcy Section Oakbrook Terrace Illinois 60181 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes	Hen was the debt incurred?	\$500.00
4.9	COMENITY BANK/CARSONS Nonpriority Creditor's Name 1314 PINELOG ROAD Number Street AIKEN South Carolina 29803 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes	When was the debt incurred? 6/1/2015 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify CreditCard	\$476.00

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Williams Debtor 1 Leon Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 CREDIT MANAGEMENT LP \$247.00 Last 4 digits of account number 1516 Nonpriority Creditor's Name When was the debt incurred? 8/1/2014 PO Box 118288 Number Street As of the date you file, the claim is: Check all that apply. Contingent Carrollton Texas 75011 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **|** ORIGINAL CREDITOR: WOW **✓** No Other. Specify INTERNET CABLE PHONE - 1 Yes 4.11 **CREDIT UN 1** \$2,381.00 Last 4 digits of account number 1004 Nonpriority Creditor's Name 200 E CHAMPAIGN AV When was the debt incurred? 1/1/2004 Number Street As of the date you file, the claim is: Check all that apply. Contingent **RANTOUL** Illinois 61866 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ CreditCard Is the claim subject to offset? **✓** No Yes DSNB MACYS 4.12 \$389.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO Box 8113 When was the debt incurred? 8/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent 45040 Ohio Mason Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts

No Yes

Is the claim subject to offset?

Other. Specify _

CreditCard

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Williams Debtor 1 Leon Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 **FNB OMAHA** \$1,660.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 3412 When was the debt incurred? 7/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **OMAHA** Nebraska 68197 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ CreditCard Is the claim subject to offset? **✓** No Yes 4.14 \$99.00 Last 4 digits of account number 8010 Nonpriority Creditor's Name 1550 N NORTWEST HWY STE 403 When was the debt incurred? 6/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent PARK RIDGE Illinois 60068 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **✓** ORIGINAL CREDITOR: MEDICAL **✓** No Other. Specify PAYMENT DATA Yes **MCYDSNB** 4.15 \$389.00 Last 4 digits of account number Nonpriority Creditor's Name 9111 DUKE BLVD When was the debt incurred? 8/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent 45040 MASON Ohio Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts

No Yes

Is the claim subject to offset?

Other. Specify _

CreditCard

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Williams Debtor 1 Leon Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 Metro South Medical Center \$3,172.33 Last 4 digits of account number Nonpriority Creditor's Name 12935 Gregory St When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60406 Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Judgment for Medical Bill: 2015-Is the claim subject to offset? **✓** No Yes 4.17 NTB/CBNA \$196.00 1352 Last 4 digits of account number ___ Nonpriority Creditor's Name 12/1/2015 When was the debt incurred? 9850 Joliet Rd Number As of the date you file, the claim is: Check all that apply. Contingent 60525 Illinois Countryside Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ CreditCard Is the claim subject to offset? **✓** No Yes Oliver Drabkin, M.D. 4.18 \$160.00 Last 4 digits of account number Nonpriority Creditor's Name 3900 W. 95th, Suite 12 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60805 Evergreen Park Illinois Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Medical Bill Other. Specify __ Is the claim subject to offset? **✓** No

Yes

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Williams Debtor 1 Leon Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 Peoples Gas \$500.00 Last 4 digits of account number Nonpriority Creditor's Name 200 E. Randolph When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60601 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ___ Gas Bill Is the claim subject to offset? **✓** No Yes 4.20 PINNACLE LLC/RESURGENT \$153.00 0001 Last 4 digits of account number ____ Nonpriority Creditor's Name 12/1/2014 810 1ST ST S STE 260 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent **HOPKINS** 55343 Minnesota Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify 001 UnknownLoanType Is the claim subject to offset? **✓** No Yes PLS Financial Solutinos of Illinois, Inc 4.21 \$7,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 1427 W Obama Drive Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60827 Riverdale Illinois Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Payday Loan Is the claim subject to offset?

✓ No Yes

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Williams Debtor 1 Leon Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.22 SYNCB/AMAZON \$471.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 965015 When was the debt incurred? 11/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent **ORLANDO** Florida 32896 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ CreditCard Is the claim subject to offset? **✓** No Yes 4.23 SYNCB/OLD NAVY \$119.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 530942 When was the debt incurred? 3/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent 30353 Atlanta Georgia Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ CreditCard Is the claim subject to offset? **✓** No Yes SYNCB/OLDNAV 4.24 \$142.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. BOX 29116 When was the debt incurred? 3/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent SHAWNEE MISSIO 66201 Kansas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts

✓ No Yes

Is the claim subject to offset?

Other. Specify _

CreditCard

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Williams Debtor 1 Leon Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** SYNCB/PNDORA 4.25 \$901.00 Last 4 digits of account number Nonpriority Creditor's Name C/O PO BOX 965036 When was the debt incurred? 9/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent **ORLANDO** Florida 32896 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify __ CreditCard Is the claim subject to offset? **✓** No Yes 4.26 SYNCB/TJX COS \$390.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 965005 When was the debt incurred? 5/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent ORLANDO Florida 32896 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ CreditCard Is the claim subject to offset? **✓** No Yes SYNCB/WALMART 4.27 \$1,330.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 981400 When was the debt incurred? 1/1/2012 Number As of the date you file, the claim is: Check all that apply. Contingent EL PASO 79998 Texas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ CreditCard Is the claim subject to offset?

✓ No Yes

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Williams Debtor 1 Leon Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.28 SYNCB/WALMART \$141.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3/1/2016 PO BOX 981400 Number As of the date you file, the claim is: Check all that apply. Contingent 79998 **EL PASO** Texas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ CreditCard Is the claim subject to offset? **✓** No Yes 4.29 TARGET/TD \$227.00 Last 4 digits of account number 0457 Nonpriority Creditor's Name P.O. Box 660170 When was the debt incurred? 12/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent Dallas 75266 Texas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ CreditCard Is the claim subject to offset? **✓** No Yes THD/CBNA 4.30 \$370.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO Box 6497 When was the debt incurred? 4/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent 57117 Sioux Falls South Dakota Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ CreditCard Is the claim subject to offset? No **|**

Yes

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Williams Debtor 1 Leon Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** US DEPT OF ED/GLELSI 4.31 \$35,659.00 Last 4 digits of account number Nonpriority Creditor's Name 2401 INTÉRNATIONAL LN When was the debt incurred? 12/1/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent MADISON Wisconsin 53704 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.32 US DEPT OF ED/GLELSI \$1,932.00 Last 4 digits of account number 8581 Nonpriority Creditor's Name 2401 INTÉRNATIONAL LN When was the debt incurred? 9/1/2011 Number Street As of the date you file, the claim is: Check all that apply. Contingent MADISON Wisconsin 53704 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes **VERIZON** 4.33 \$500.00 Last 4 digits of account number Nonpriority Creditor's Name 500 TECHNOLOGY DR STE 30 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated WELDON SPRING Missouri 63304 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify _ Phone Bill Is the claim subject to offset?

✓ No Yes

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Williams Debtor 1 Leon Case number (if known) Middle Name First Name Last Name Part 3: List Others to Be Notified About a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Komyatte & Casbon, P.C. On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check 9650 Gordon Dr Line 4.16 Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Highland Indiana 46322 Last 4 digits of account number City State Zip Code PLS Loan Store On which entry in Part 1 or Part 2 did you list the original creditor? 154 N Wabash Ave of (Check Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Illinois 60601 Chicago Last 4 digits of account number City State Zip Code PLS - Bankruptcy On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check 8026 S Cicero Ave Line 4.21 Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Burbank Illinois 60459 Last 4 digits of account number City Zip Code State

On which entry in Part 1 or Part 2 did you list the original creditor?

Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured

of (Check

one):

Last 4 digits of account number

ICS Collection Service

Street

Illinois

State

60477

Zip Code

PO Box 1010

Number

Tinley Park

City

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Debtor 1 Leon Williams Case number (if known)

Middle Name First Name Last Name Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$37,591.00 **Total claims** 6f. Student loans from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar \$35,480.33 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$73,071.33 6j. Total. Add lines 6f through 6i.

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Fill in this information to identify your case:							
Debtor 1	Leon		Williams				
	First Name	Middle Name	Last Name				
Debtor 2	Theresa		Faulkner				
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		Northern	District of Illinois (State)				
Case number			(otato)				

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or compa	any with whom you have	e the contract or lease	State what the contract or lease is for
Ingersol, Vicky Name			Residential Lease, Debtor is Lessee, Oral Monthly Residential Lease
Number	Street		
City	State	Zip Code	

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		DC	cument rage	30 01 7 3
Fill in this info	rmation to identify your c	ase:		
Debtor 1	Leon		Williams	
	First Name	Middle Name	Last Name	
Debtor 2	Theresa		Faulkner	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)				
	Form 106H	lebtors		amended filing
filing together the entries in known). Answ	r, both are equally respo the boxes on the left. At er every question.	nsible for supplying corre tach the Additional Page	ect information. If more spector this page. On the top	omplete and accurate as possible. If two married people are ace is needed, copy the Additional Page, fill it out, and number of any Additional Pages, write your name and case number (if
1. Do you h No Yes		ou are filing a joint case, do	not list either spouse as a c	odebtor.)
	• •	• •	pperty state or territory? (Community property states and territories include Arizona, California,

Zip Code

Yes. In which community state or territory did you live? ______ Fill in the name and current address of that person.

Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

State

Name of your spouse, former spouse, or legal equivalent

No. Go to line 3.

City

Number Street

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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		DOC	Jument	Paye 39	01 79		
Fill in this in	nformation to identify	your case:					
Debtor 1	Leon		Williams				
Dobtor 1	First Name	Middle Name	Last Nan	ne	- Ch	eck if this is:	
Debtor 2	Theresa		Faulkner				
(Spouse, if filing	g) First Name	Middle Name	Last Nan	ne		An amended filing	
United States the:	s Bankruptcy Court for	Northern	District of Illino (Stat		- -	A supplement showing post-poexpenses as of the following d	
Case numbe (If known)	r				_	MM / DD / YYYY	
Official	Form 106I				<u></u>		
Schedu	ıle I: Your İn	come					12/1
spouse. If m number (if k		l, attach a separate shed y question.				not include information ab ional pages, write your nai	
1. Fill in yo	ur employment		Debtor 1			Debtor 2	
informat	ion.	Employment status					
attach a s	ve more than one job, separate page with on about additional	Employment status	✓ Employe Not Emp			✓ Employed✓ Not Employed	
employer	S.	Occupation				_	
	art time, seasonal, or oyed work.	Employer's name	CTA - Payroll	Office		_	
	on may include student naker, if it applies.	Employer's address	567 W. Lake Number Street			Number Street	
			Chicago City	Illinois State	60601 Zip Code	City State	Zip Code
		How long employed there?					
Part 2: Gi	ve Details About N	Nonthly Income					
	nonthly income as of ess you are separated.	the date you file this form	1. If you have no	thing to repo	rt for any line,	write \$0 in the space. Include y	our non-filing
			combine the inf	ormation for a	all employers fo	or that person on the lines belo	w. If you need
more space	e, attach a separate she	et to this form.		For D	Debtor 1	For Debtor 2 or non-filing spouse	
2. List mo	onthiv gross wages eals	ary, and commissions (before	re all payroll 2		¢5 820 20		
		, calculate what the monthly v		·	\$5,820.30	\$0.00	
3. Estima	te and list monthly ove	rtime pay.	3		+ \$0.00	+ \$0.00	

\$5,820.30

\$0.00

4. Calculate gross income. Add line 2 + line 3.

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Debtor		Villiams	Case numbe	er (if	
	First Name Middle Name L	ast Name	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy	/ line 4 here	→ 4. ¯	\$5,820.30	\$0.00	
5. List :	all payroll deductions:				
5a	Tax, Medicare, and Social Security deductions	5a.	\$1,519.77	\$0.00	
5b.	Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00	
5c. \	Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00	
5d.	Required repayments of retirement fund loans	5d.	\$0.00	\$0.00	
5e. I	Insurance	5e.	\$384.97	\$0.00	
5f. C	Domestic support obligations	5f.	\$0.00	\$0.00	
5g.	Union dues	5g.	\$71.50	\$0.00	
5h.	Other deductions. Specify:	5h. +	\$824.61 +	\$0.00	
6. Add +5h.	the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f	+ 5g 6.	\$2,800.85	\$0.00	
7. Calc	ulate total monthly take-home pay. Subtract line 6 from line	4. 7.	\$3,019.45	\$0.00	
8. List	all other income regularly received:				
	Net income from rental property and from operating a business, profession, or farm				
Ç	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	\$0.00	
	Interest and dividends	8b.	\$0.00	\$0.00	
8c. I	Family support payments that you, a non-filing spouse, or a dependent regularly receive	•	Ψ0.00	<u> </u>	
ı	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00	
8d.	Unemployment compensation	8d.	\$0.00	\$0.00	
8e. \$	Social Security	8e.	\$0.00	\$0.00	
li c u h	Other government assistance that you regularly receive nounce cash assistance and the value (if known) of any non-eash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or nousing subsidies specify: Food Assistance Programs Income	8f. <u>.</u>	\$0.0 <u>0</u>	\$357.0 <u>0</u>	
8g. l	Pension or retirement income	8g.	\$0.00	\$0.00	
8h.	Other monthly income. Specify:	8h. +	\$0.00 +	\$0.00	
9. Add	all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g +	· 8h. 9.	\$0.00	\$357.00	
	culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing sp	10. oouse	\$3,019.45	\$357.00 =	\$3,376.45
Inclu frien	te all other regular contributions to the expenses that you ude contributions from an unmarried partner, members of your ds or relatives. not include any amounts already included in lines 2-10 or amounts.	household, your d	ependents, your roomi		
Spec	cify:			11. +	+ \$0.00
	If the amount in the last column of line 10 to the amount in the summary of Schedules and Statistical Sur			,	\$3,376.45
					Combined monthly income
13. Do	you expect an increase or decrease within the year after y	ou file this form?			
	Yes. Explain:				

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Debtor 1 Leon Williams Case number (if First Name Middle Name Last Name known)

Part 2: Give Details About Monthly Income

Official Form 106I. Additional page.

	For Debtor 1	For Debtor 2 or non-filing spouse
5h.Other payroll deductions. Specify:		
1. FCU 77th St Garage	\$650.00	\$0.00
2. Involuntary Deductions for Employment	\$174.61	\$0.00

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		Doo	ument Page 42 of 79	9	
Fill in this infor	mation to identify	your case:			
Debtor 1	Leon First Name	Middle Name	Williams Last Name	Check if this is:	
Debtor 2	Theresa		Faulkner		
(Spouse, if filing)	First Name	Middle Name	Last Name	An amended fili	ng
	Bankruptcy Court f	or the: Northern	District of Illinois (State)		howing post-petition chapter 13 the following date:
Case number (If known)	-			MM / DD / YYY	<u>Y</u>
	Form 10	6J Expenses			12/1:
Be as complete information. If i (if known). Ans	e and accurate a	is possible. If two married people eded, attach another sheet to thon.	are filing together, both are equal is form. On the top of any addition		
1. Is this a join	nt case?				
	to line 2				
Yes. Do	oes Debtor 2 live	in a separate household?			
	✓ No				
	Yes. Debtor 2	must file Official Forms 106J-2, Expe	enses for Separate Household of Deb	tor 2.	
2. Do you have	e dependents?	No			
Do not list D Debtor 2.	ebtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2 Child	Dependent's age	Does dependent live with you?
					Yes.
	penses include f people other d your	✓ No Yes			
dependents	-				
Part 2: Estir	mate Your Ong	oing Monthly Expenses			
	of a date after the		you are using this form as a suppl upplemental Schedule J, check the		
	•	non-cash government assistance uded it on Schedule I: Your Incom	-		Your expenses
	or home owners		Include first mortgage payments and		**700.00

4a

4b.

4c.

4d.

\$0.00

\$0.00

\$0.00

\$0.00

If not included in line 4: 4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Leon Williams Case number (if known)

First Name	Middle Name	Last Name		
				Your expenses
5. Additional mortgage payments fo	r your residence, such a	as home equity loans	5.	\$0.00
6. Utilities:				
6a. Electricity, heat, natural gas			6a.	\$280.00
6b. Water, sewer, garbage collection	١		6b.	\$0.00
6c. Telephone, cell phone, Internet,	satellite, and cable service	es	6c.	\$150.00
6d. Other. Specify:			6d	\$0.00
7. Food and housekeeping supplies			7.	\$500.00
8. Childcare and children's education	on costs		8.	\$0.00
9. Clothing, laundry, and dry cleaning	ıg		9.	\$100.00
10. Personal care products and serv	vices		10.	\$60.00
11. Medical and dental expenses			11.	\$35.00
12. Transportation. Include gas, main Do not include car payments	ntenance, bus or train fare		12.	\$250.00
13. Entertainment, clubs, recreation	ո, newspapers, magazin	es, and books	13.	\$0.00
14. Charitable contributions and rel	igious donations		14.	\$0.00
15. Insurance. Do not include insurance deducted	from your pay or included	d in lines 4 or 20.		
15a. Life insurance			15a	\$0.00
15b. Health insurance			15b	\$0.00
15c. Vehicle insurance			15c	\$430.00
15d. Other insurance. Specify:			15d	\$0.00
16. Taxes. Do not include taxes deduc	ted from your pay or inclu	uded in lines 4 or 20.		
Specify:			16	\$0.00
17. Installment or lease payments:			10	
17a. Car payments for Vehicle 1			17a	\$613.00
17b. Car payments for Vehicle 2			17b	\$250.00
17c. Other. Specify:			17c	\$0.00
17d. Other. Specify:			17d	\$0.00
18. Your payments of alimony, main	tenance, and support the	hat you did not report as deducted from	174	\$0.00
your pay on line 5, Schedule I, Y			18.	
19. Other payments you make to sup	port others who do not	live with you.		
Specify:			19.	\$0.00
	t included in lines 4 or 5	5 of this form or on Schedule I: Your Incon		
20a. Mortgages on other property			20a	\$0.00
20b. Real estate taxes.			20b	\$0.00
20c. Property, homeowner's, or ren			20c	\$0.00
20d. Maintenance, repair, and upke			20d	\$0.00
20e. Homeowner's association or c	ondominium dues		20e	\$0.00

Official Form 106J Schedule J: Your Expenses page 2

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Debtor 1 Leon			Williams	Case number (if known)		
First N	lame	Middle Name	Last Name			
21. Other. Spe	cify:				21	\$0.00
22. Calculate	your monthly expense	es.				\$3,368.00
22a. Add lir	ies 4 through 21.					\$0.00
22b. Copy	line 22 (monthly expens	ses for Debtor 2), if any,	from Official Form 106J-2			\$3,368.00
22c. Add lir	e 22a and 22b. The res	sult is your monthly exp	enses.		22.	
23. Calculate	our monthly net inco	me.				
23a. Copy	ine 12 (your combined	monthly income) from S	Schedule I.		23a	\$3,376.45
23b. Copy	your monthly expenses	from line 22 above.			23b	\$3,368.00
	, , ,	ses from your monthly in	icome.			\$8.45
The re	sult is your monthly ne	t income.			23c	
For examp	le, do you expect to fini	ish paying for your car lo	ses within the year after your within the year or do you no diffication to the terms of	ou expect your		

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Fill in this information to identify your case:						
Debtor 1	Leon		Williams			
	First Name	Middle Name	Last Name			
Debtor 2	Theresa		Faulkner			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois (State)			
Case number			(,			

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?						
No.	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?					
✓ No						
Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).						
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.						
X /s/ Leon Williams X /s/ Theresa Faulkner						
Signature of Debtor 1 Signature of Debtor 2						
Date 3/6/2017 Date 3/6/2017 MM/DD/YYYY						

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Fill in	this infor	mation to identify y	our case:					
Debto				Williams				
Depto	or i	Leon First Name	Middle		e			
Debto	or 2	Theresa		Faulkner				
(Spous	e, if filing)	First Name	Middle	Name Last Nam	е			
United	d States E	Bankruptcy Court fo	r the: Northern	District of Illino				
Case (If know	number vn)			(
Offi	icial	Form 107	,			<u> </u>		Check if this is amended filing
Stat	teme	nt of Finar	- icial Affairs	for Individuals	Filing for	Bankrı	ıptcy	12/
inforn	nation. I		reeded, attach a sep	narried people are filing parate sheet to this form				
Part '	1: Give	Details About	our Marital Status	and Where You Lived	Before			
1.	What is	your current mari	tal status?					
	✓ Ma	rried						
		married						
2.	During t	he last 3 years, ha	ıve you lived anywheı	re other than where you liv	ve now?			
	✓ No Yes	s. List all of the plac	ces you lived in the las	st 3 years. Do not include v	where you live r	now.		
	Deb	otor 1:		Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
					Same as	Debtor 1		Same as Debtor 1
	Nur	nber Street		From	Number Stre	<u>et</u>		From
		inder Otreet		То				То
			7: 0 1		0''	0		
	City	State	Zip Code		City	State	Zip Code	
					Same as	Debtor 1		Same as Debtor 1
	Nur	mber Street		From	Number Stre	et		From
				То				То
								·
	City	State	Zip Code		City	State	Zip Code	
a	nd territo	<i>ries</i> include Arizona,	California, Idaho, Loui	pouse or legal equivalent isiana, Nevada, New Mexico,	Puerto Rico, Te			

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Williams Debtor 1 Leon Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$10620.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$65161.00 For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$60000.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and and exclusions) exclusions) Est. LINK \$714.00 From January 1 of current year until the date you filed for bankruptcy: Est. LINK \$4,284.00 For last calendar year: (January 1 to December 31, 2016 Est. LINK \$6,132.00 For the calendar year before that: (January 1 to December 31, 2015

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Williams Debtor 1 Leon __ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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or 1	1 Leon			Wi	lliams	Case number	(if known)
	First Name		Middle Name	Las	st Name		
nsi orp age	iders include your porations of which	relatives; an you are a for a busin	iny general partners in officer, director, p less you operate as	; relatives of any person in control,	general partners; par or owner of 20% o	tnerships of which y r more of their voting	who was an insider? you are a general partner; g securities; and any managing r domestic support obligations,
✓	No						
	Yes. List all pay	ments to a	an insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
_	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
insi	der? ude payments on No	debts gua	ranteed or cosigne	d by an insider.	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						Include creditor's name
	Number Street						
-	City	State	Zip Code				
	Insider's Name			-			
	Number Street						
	City	State	Zip Code				

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Williams

Debtor 1 Leon Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Contract Cook County Circuit Court Pending Court Name On appeal 50 West Washington Street Case number NumberStreet Concluded 2015-M1-113553 Illinois 60602 Chicago City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Wage Assignment Notice by PLS 01/2017 \$0 PLS Financial Solutinos of Illinois, Inc Creditor's Name Explain what happened 800 Jorie Blvd Number Street Property was repossessed. Property was foreclosed. Oak Brook Illinois 60523 Property was garnished. State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name **Explain what happened** Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt	otor 1 Leon	Williams	Case number (if known)	
	First Name Middle Name	Last Name		
11.	accounts or refuse to make a payment because		pank or financial institution, set off any am	ounts from your
	✓ No Yes. Fill in the details.			
		Describe the action th	e creditor took Date action was taken	Amount
	Creditor's Name	_		-
	Number Street	_		
		_ Last 4 digits of account	number: XXXX-	
	City State Zip Code	_		
12.	Within 1 year before you filed for bankruptcy, was appointed receiver, a custodian, or another offici		possession of an assignee for the benefit o	of creditors, a court-
	✓ No			
	Yes			
Part	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptcy, d	id you give any gifts with a t	otal value of more than \$600 per person?	
	No Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift	_		-
	Number Street	_		
	City State Zip Code	_		
	Person's relationship to you			
	Person to Whom You Gave the Gift	_		-
		_		
	Number Street	_		
	City State Zip Code	_		
	Person's relationship to you			

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	Leon	Williams	Case number (if know)	n)	
	First Name Middle Name	e Last Name		·	
. Wit	hin 2 years before you filed for bankrupto	cy, did you give any gifts or contribu	tions with a total value o	of more than \$600	to any charity?
	No				
✓					
	Yes. Fill in the details for each gift or con	ntribution.			
	Gifts or contributions to charities	Describe what you contri	huted	Date you	Value
	that total more than \$600	Describe what you contin	buteu	contributed	Value
	that total more than \$600			Continuated	
	Charity's Name				
	Number Street				
	Number Street				
	City State Zip Cod	do			
	Oity State Zip Ood				
C.	List Certain Losses				
. 0.	<u> </u>				
	Yes. Fill in the details. Describe the property you lost and how the loss occurred	Describe any insurance of Include the amount that ins	surance has paid. List	Date of your loss	Value of property lost
		pending insurance claims of	n line 33 of <i>Schedule</i>		
		A/B: Property.		,	
				ı	
rt 7:	List Certain Payments or Transfers	}			
	ut seeking bankruptcy or preparing a ba	nkruptcy petition?			anyone you consulte
		nkruptcy petition?			anyone you consulte
	out seeking bankruptcy or preparing a baude any attorneys, bankruptcy petition prepared. No	nkruptcy petition?	services required in your ba	Date payment or transfer	Amount of payment
	out seeking bankruptcy or preparing a baude any attorneys, bankruptcy petition prepared No Yes. Fill in the details.	nkruptcy petition? arers, or credit counseling agencies for a Description and value of a transferred	services required in your ba	Date payment or transfer was made	Amount of payment
	out seeking bankruptcy or preparing a baude any attorneys, bankruptcy petition prepared No Yes. Fill in the details. Semrad Law Firm	nkruptcy petition? arers, or credit counseling agencies for a Description and value of a	services required in your ba	Date payment or transfer	Amount of
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid	nkruptcy petition? arers, or credit counseling agencies for a Description and value of a transferred	services required in your ba	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue	nkruptcy petition? arers, or credit counseling agencies for a Description and value of a transferred	services required in your ba	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid	nkruptcy petition? arers, or credit counseling agencies for a Description and value of a transferred	services required in your ba	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue	nkruptcy petition? arers, or credit counseling agencies for a Description and value of a transferred	services required in your ba	Date payment or transfer was made	Amount of payment
	No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street	Description and value of a transferred Attorney's Fee - 0.00	services required in your ba	Date payment or transfer was made	Amount of payment
	No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643	Description and value of a transferred Attorney's Fee - 0.00	services required in your ba	Date payment or transfer was made	Amount of payment
	No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street	Description and value of a transferred Attorney's Fee - 0.00	services required in your ba	Date payment or transfer was made	Amount of payment
	No Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Cod	Description and value of a transferred Attorney's Fee - 0.00	services required in your ba	Date payment or transfer was made	Amount of payment
	No Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Cod Email or website address	Description and value of a transferred Attorney's Fee - 0.00	services required in your ba	Date payment or transfer was made	Amount of payment
	No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Cod Email or website address None	Description and value of a transferred Attorney's Fee - 0.00	services required in your ba	Date payment or transfer was made	Amount of payment
	No Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Cod Email or website address	Description and value of a transferred Attorney's Fee - 0.00	services required in your ba	Date payment or transfer was made	Amount of payment
	No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Cod Email or website address None	Description and value of a transferred Attorney's Fee - 0.00	services required in your ba	Date payment or transfer was made	Amount of payment
	No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Cod Email or website address None	Description and value of a transferred Attorney's Fee - 0.00	services required in your ba	Date payment or transfer was made	Amount of payment
	No Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Cod Email or website address None Person Who Made the Payment, if Not You	Description and value of a transferred Attorney's Fee - 0.00	services required in your ba	Date payment or transfer was made	Amount of payment
	No Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Cod Email or website address None Person Who Made the Payment, if Not You	Description and value of a transferred Attorney's Fee - 0.00	services required in your ba	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Cod Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid	Description and value of a transferred Attorney's Fee - 0.00	services required in your ba	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Cod Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid	Description and value of a transferred Attorney's Fee - 0.00	services required in your ba	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Cod Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid	Description and value of a transferred Attorney's Fee - 0.00	services required in your ba	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Cod Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid	Description and value of a transferred Attorney's Fee - 0.00	services required in your ba	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Cod Email or website address None Person Who Was Paid Number Street Chicago Illinois 60643 City State Zip Cod Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid Number Street City State Zip Cod	Description and value of a transferred Attorney's Fee - 0.00	services required in your ba	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Cod Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid	Description and value of a transferred Attorney's Fee - 0.00	services required in your ba	Date payment or transfer was made	Amount of payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Cod Email or website address None Person Who Was Paid Number Street Chicago Illinois 60643 City State Zip Cod Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid Number Street City State Zip Cod	Description and value of a transferred Attorney's Fee - 0.00	services required in your ba	Date payment or transfer was made	Amount of payment

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Debtor ¹	1 Leon		Williams	Case number (if known)		
	First Name	Middle Name	Last Name			
he	Ip you deal with your credi o not include any payment or	tors or to make paym		behalf pay or transfer a	any property to anyo	one who promised to
Ė	4					
	Yes. Fill in the details.					
			Description and value of any p transferred	property	Date A payment or transfer was made	mount of payment
	Person Who Was Paid		-			
	Number Street		-			
	0.1	7'- 0-4	- -			
	City State	Zip Code				
an	d transfers that you have alre No Yes. Fill in the details.	ady listed on this stater				
			Description and value of any property transferred	Describe any payments rec in exchange	property or eived or debts paid	Date transfer was made
	JP Morgan Chase Bank Person Who Received Tran 700 Kansas Lane Number Street	nsfer	\$613.09	Monthly Payr Crosstour	nent for 2013 Honda	03/02/2017
	ATT: Abby Ush					
	Monroe Louisia	ana 71203				
	City State Person's relationship to yo Car Creditor	Zip Code ou				
	Ways to Work		\$500	Monthly Car I	Payment 2005	03/02/2017
	Person Who Received Tran			Dodge Magn	-	
	1140 N. Lamon Ave., 3rd Number Street	Floor				
	Chicago Illinois City State Person's relationship to yo Car Creditor	60651 Zip Code ou				
be	thin 10 years before you fil neficiary? nese are often called asset-pr		d you transfer any property to a se	lf-settled trust or simi	lar device of which	you are a
<u> </u>	4					
	Yes. Fill in the details.		Description and value of the	property transferred		Date
			bosonphon and value of the	property transferreu		transfer was made
	Name of trust					

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Page 54 of 79 Document Williams Debtor 1 Leon Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name

City

Number Street

State

Zip Code

Street

State

Zip Code

Number City

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Williams Debtor 1 Leon Case number (if known) Middle Name First Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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Debt	or 1				Williams	Case r	number <i>(if k</i>	rnown)	_
		First Name	Mic	ddle Name	Last Name				
26.			y in any judicial	l or administrat	ive proceeding under	any environmenta	al law? Inc	lude settlements and or	ders.
	$ \underline{\checkmark} $	No							
		Yes. Fill in the det	ails.						
				Ce	ourt or agency		Nature of	f the case	Status of the case
		Case title				_			Pending
					ourt Name	_			On appeal
		Case number		Nı	umberStreet				Concluded
				Ci	ty State	Zip Code			
Part	11:	Give Details Ab	oout Your Bus	siness or Con	nections to Any Bu	siness			
27.	With	nin 4 years before	you filed for ba	nkruptcy, did y	ou own a business or	have any of the fol	llowing co	nnections to any busine	ss?
		A sole propri	etor or self-emp	oloyed in a trad	e, profession, or other	activity, either full-	-time or pa	art-time	
			-	-	C) or limited liability pa		·		
		A partner in a		, , , ,	, , , , , , ,	1 ()			
				aina executive	of a corporation				
					uity securities of a corp	ooration			
	_	_			,				
	⊻	No. None of the a							
	Ш	Yes. Check all tha	at apply above	and fill in the de	etails below for each b				
					Describe the natu	re of the business	3	Employer Identification include Social Security	
		Dusiness Name						EIN:	
		Business Name							
		Number Street			Name of accounta	ant or bookkeeper		Dates business existed	
		City	State	Zip Code				From To	
					Describe the natu	re of the business	3	Employer Identification include Social Security	
		Business Name						EIN:	
		Number Street			Name of accounta	ant or bookkeeper		Dates business existed	
		City	State	Zip Code				From To	
					Describe the natu	re of the business	;	Employer Identification	number Do not
								include Social Security	number or ITIN.
		Business Name						EIN:	
		Number Street						Dates business existed	
		Cit.	Otate	Zim Coult	Name of accounta	ant or bookkeeper		_	
		City	State	Zip Code				From To	

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Debto	or 1 Leon	Williams	Case number (if known)
	First Name Middle Name	Last Name	
	Within 2 years before you filed for bankruptcy, did you creditors, or other parties.	ı give a financial statement	to anyone about your business? Include all financial institutions,
i	Yes. Fill in the details below.		
		Date issued	
	Name	MM/DD/YYYY	
	Number Street		
	City State Zip Code		
Part '	12: Sign Below		
tr	rue and correct. I understand that making a false state	ement, concealing property,	s, and I declare under penalty of perjury that the answers are or obtaining money or property by fraud in connection with years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. (s/Theresa Faulkner
	Signature of Debtor 1		Signature of Debtor 2
	Date 3/6/2017		Date 3/6/2017
Di	id you attach additional pages to Your Statement of F	inancial Affairs for Individua	lls Filing for Bankruptcy (Official Form 107)?
<u>~</u>	No Yes		
Di	id you pay or agree to pay someone who is not an atto	orney to help you fill out ban	kruptcy forms?
V	No		
Ë	Yes. Name of person		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1	Leon		Williams	Case number (if known)	
	First Name	Middle Name	Last Name		

Additional Page

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

	Description and value of any property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Weathers, Leonard	\$407	Monthly Residential Rent	03/02/2017
Person Who Received Transfer			
Number Street			
City State Zip Code Person's relationship to you Landlord			
Peoples Gas	\$101.50	Gas Bill	03/02/2017
Person Who Received Transfer 200 E. Randolph			
Number Street			
Chicago Illinois 60601			
City State Zip Code Person's relationship to you Gas Company			
Comed	\$322	Electric Bill	03/02/2017
Person Who Received Transfer			
Number Street	_		
City State Zip Code Person's relationship to you Electric Bill			
Comcast	\$104	Cable Bill	03/02/2017
Person Who Received Transfer p.o. box 196			
Number Street			
Newark New Jersey 07101			
City State Zip Code Person's relationship to you Cable Creditor			
Semrad Law Firm	\$1600	Chapter 7 Bankruptcy Attorney Fees	03/02/2017
Person Who Received Transfer 303 Perimeter Center North			
Number Street			
Atlanta Georgia 30346			
City State Zip Code Person's relationship to you Bankruptcy Firm			
Faulkner, Theresa	\$700	\$700 given to wife as gift	03/02/2017
Person Who Received Transfer 648 E 77th St FI 1			
Number Street			
Chicago Illinois 60619			
City State Zip Code Person's relationship to you Wife			

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Debtor 1	Leon		Williams	Case n	Case number (if known)			
	First Name		Middle Name	Last Name	-			
	Additional Pa	age						
			ankruptcy, did yo s or financial affa		any pro	perty to anyone, other than propert	y transferred in	
				Description and value of any property transferred		Describe any property or payments received or debts paid in exchange	Date transfer was made	
	Geico			\$145		Car Insurance Payment	03/03/2017	
	Person Who Received Transfer One GEICO Plaza Bethesda			•		·		
	Number Street		-					
	Bethesda	Maryland	20810					
	City Person's relation Car Insuran		Zip Code	•				

Company

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Fill in this information to identify your case:							
Debtor 1	Leon	Williams					
	First Name	Middle Name	Last Name	_			
Debtor 2	Theresa		Faulkner				
(Spouse, if filing)	First Name	Middle Name	Last Name	_			
United States Bankruptcy Court for the:		Northern	District of Illinois (State)	_			
Case number (If known)			()	_			

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.						
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?				
	Creditor's name: CHASE AUTO Description of property securing debt: 072 Automobile	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and	No. ✓ Yes.				
	Creditor's name: WAYS TO WORK INC Description of property securing debt: 036 Automobile	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and	No. ✓ Yes.				
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and	No. Yes.				
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. Yes.				

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Debtor	Leon		Williams	Case number (if	
1	First Name	Middle Name	Last Name	known)	-
Part 2:	List Your Unexpired Pe	ersonal Property Lease	es		
informa		estate leases. Unexpired	leases are leases tha	ory Contracts and Unexpired Leases (Official Form 106G), fill in the at are still in effect; the lease period has not yet ended. You may I1 U.S.C. § 365(p)(2).	
De	scribe your unexpired perso	onal property leases		Will the lease be assumed?	
Les	ssor's name:			□ No □ Yes	
	scription of leased operty:				
Les	ssor's name:			□ No □ Yes	
	scription of leased operty:			_	
Les	ssor's name:			□ No □ Yes	
	scription of leased perty:			_	
Les	ssor's name:			No Yes	
	scription of leased perty:				
Les	ssor's name:			No Yes	
	scription of leased operty:				
Les	ssor's name:			No Yes	
	scription of leased perty:				
Les	ssor's name:			□ No □ Yes	
	scription of leased operty:				
Part_3:	Sign Below				
Unde			ny intention about an	ny property of my estate that secures a debt and any personal	_
4.5			4.5		
_	/s/ Leon Williams			/s/ Theresa Faulkner	
S	ignature of Debtor 1		S	Signature of Debtor 2	
D	Date 3/6/2017		D	Date 3/6/2017	
	MM/DD/YYYY			MM/DD/YYYY	

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Leon Williams ; Theresa Fau		Case No.	
	Debtor	ikilei	Case No	(If known)
			Chapter	Chapter 7
	DISCLOSURE OF	COMPENSATI	ON OF ATTORNEY	FOR DEBTOR
С	Pursuant to 11 U.S.C. § 329(a) and Foompensation paid to me within one endered or to be rendered on behalf	year before the filing of t	ne petition in bankruptcy, or agree	ed to be paid to me, for services
F	For legal services, I have agreed to ac	cept		\$1,265.00
F	Prior to the filing of this statement I h	ave received		\$0.00
Е	Balance Due			\$1,265.00
2. T	he source of the compensation paid	to me was:		
	✓ Debtor	Other (spec	fy)	
3. T	he source of the compensation paid	to me is:		
	Debtor	Other (spec	fy)	
4.	I have not agreed to share the abomembers and associates of my la	ove-disclosed compensa w firm.	tion with any other person unless	s they are
	I have agreed to share the above- members or associates of my law the people sharing in the comper	firm. A copy of the agree	with a other person or persons wernent, together with a list of the r	
5. Ir	n return for the above-disclosed fee, a. Analysis of the debtor's finand bankruptcy;		egal service for all aspects of the bing advice to the debtor in determ	
	b. Preparation and filing of any p	petition, schedules, state	ments of affairs and plan which m	nay be required;
	c. Representation of the debtor	at the meeting of creditor	rs and confirmation hearing, and a	any adjourned hearings thereof;
6. E	By agreement with the debtor(s), the a	above-disclosed fee does	not include the following service	28:
		CERTIF	FICATION	
	ertify that the foregoing is a completer(s) in this bankruptcy proceedings.	e statement of any agree	ment or arrangement for payment	to me for representation of the
	3/6/2017		/s/ Morsheda Hashem	
	Date		Signature of Attorney	_
			Semrad Law Firm	
	-		Name of law firm	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1 717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Williams, Leon ; Faulkner, Theresa	Case No	
	Debtor(s)	Ouse No.	
		Chapter.	Chapter7
	VERIFICATIO	N OF CREDITOR MATRIX	
T knowledge	he above named Debtors hereby verify that the e.	attached list of creditors is true and	correct to the best of their
Date:	3/6/2017	/s/ Williams, Leon	
		Williams, Leon Signature of Debtor	
		/s/ Faulkner, Theresa	
		Faulkner, Theresa Signature of Joint Debtor	

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CHASE AUTO 900 STEWART AVE GARDEN CITY, NY, 11530

WAYS TO WORK INC 11700 West Lake Park Drive Milwaukee, WI, 53224

US DEPT OF ED/GLELSI 2401 INTERNATIONAL LN MADISON, WI, 53704

CHASE CARD P.O. BOX 15298 WILMINGTON, DE, 19850

77th St Depo 210 W 79th St Chicago, IL, 60620

CREDIT UN 1 200 E CHAMPAIGN AV RANTOUL, IL, 61866

CB/ASTEWRT 220 W SCHROCK RD COLUMBUS, OH, 43081

FNB OMAHA PO BOX 3412 OMAHA, NE, 68197

SYNCB/WALMART PO BOX 981400 EL PASO, TX, 79998

SYNCB/PNDORA C/O PO BOX 965036 ORLANDO, FL, 32896

COMENITY BANK/CARSONS 1314 PINELOG ROAD AIKEN, SC, 29803 SYNCB/AMAZON PO BOX 965015 ORLANDO, FL, 32896

BANK OF AMERICA POB 17054 WILMINGTON, DE, 19884

SYNCB/TJX COS PO BOX 965005 ORLANDO, FL, 32896

MCYDSNB 9111 DUKE BLVD MASON, OH, 45040

DSNB MACYS PO Box 8113 Mason, OH, 45040

THD/CBNA PO Box 6497 Sioux Falls, SD, 57117

CREDIT MANAGEMENT LP PO Box 118288 Carrollton, TX, 75011

TARGET/TD P.O. Box 660170 Dallas, TX, 75266

BBY/CBNA PO BOX 6497 SIOUX FALLS, SD, 57117

NTB/CBNA 9850 Joliet Rd Countryside, IL, 60525

PINNACLE LLC/RESURGENT 810 1ST ST S STE 260 HOPKINS, MN, 55343

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SYNCB/OLDNAV P.O. BOX 29116 SHAWNEE MISSIO, KS, 66201

SYNCB/OLD NAVY Po Box 530942 Atlanta, GA, 30353

MBB 1550 N NORTWEST HWY STE 403 PARK RIDGE, IL, 60068

Metro South Medical Center 12935 Gregory St Blue Island, IL, 60406

Komyatte & Casbon, P.C. 9650 Gordon Dr Highland, IN, 46322

PLS Loan Store 1215 E 87th Street Chicago, IL, 60619

PLS Financial Solutinos of Illinois, Inc 4031 B W. 183rd St Country Club Hills, IL, 60478

PLS - Bankruptcy 8026 S Cicero Ave Burbank, IL, 60459

ComEd 3 Lincokln Cetre c/o Sabrina Copelan Villa Park, IL, 60181

Peoples Gas 200 E. Randolph Chicago, IL, 60601

VERIZON 455 Duke Drive Franklin, TN, 37067 Oliver Drabkin, M.D. 3900 W. 95th, Suite 12 Evergreen Park, IL, 60805

ICS Collection Service PO Box 1010 Tinley Park, IL, 60477

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC, to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I agree to pay The Semrad Law Firm, LLC \$1265.00 in attorney fees plus costs in the amount of \$335.00 to represent my interests in the preparation and filing of my Chapter 7 Petition and Schedules; preparation and attendance of the Section 341 Meeting of Creditors; review of any redemption agreements; review of any reaffirmation agreements; and case administration and monitoring. I further understand and agree that additional professional legal services will result in fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representing Client in Adversary Proceeding.

Adding additional bills

Motion to Reopen and Avoid Lien

Motion to Reopen

\$300.00/hr.

\$31.00

\$1000.00

\$350.00 + court costs

I understand that these fees must be paid before such work will be completed. I acknowledge and agree that as the above additional fees constitute post-petition services, they are not dischargeable in my Chapter 7 case.

I also understand that, unless otherwise agreed, my Chapter 7 bankruptcy case will not be filed until I pay the attorney fees in full. As The Semrad Law Firm, LLC will begin to work on my file immediately after entering into this contract; I understand that any and all funds paid are not refundable.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay the balance of any unpaid fees to The Semrad Law Firm, LLC . Any fees owing to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy may be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay unpaid fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw representation in the event that I do not sign a second retainer after filing my case promising to pay said fees or in the event that I do not pay said fees.

I understand that any funds that I am tendering to The Semrad Law Firm, LLC, as part of this advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm. I further understand that it is ordinarily my option to deposit funds with an attorney that shall remain my property as security for future services. However, The Semrad Law Firm, LLC, does not

Initial:

Rè√ 1/2017

represent clients under such a security retainer because the preparation of a bankruptcy case requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while others may be only ministerial in nature. I further understand that the benefit that I am receiving under this fee arrangement is the commitment of The Semrad Law Firm, LLC, to perform any and all work reasonably necessary to file my case absent any extraordinary circumstances.

As The Semrad Law Firm, LLC, has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC. This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.*

I also understand that, if I am refiling a case with The Semrad Law Firm, LLC, and an audit of the previous case(s) indicate that remaining attorney fees are owed; any initial funds I pay to refile will first be applied to the balance owed on the previous case(s). If client breaches this agreement, client will be responsible for all costs associated with enforcing the terms of this contract including but not limited to court costs and attorney fees.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC, or an agent thereof.

Date: 03/02/2017

Milliani reon

🌇 Theresa Faulknei

*DISCLAIMER

The creditors listed in your bankruptcy petition will receive notice of your bankruptcy filing from the Clerk of the United States Bankruptcy Court. Please be advised that it will be several days before these creditors receive the notice. Therefore, if you are concerned about a particular creditor taking immediate action against you, contact this creditor directly and provide the creditor with a copy of your Notice of Bankruptcy Filing. This is especially important if you are at risk of having you vehicle repossessed, real estate foreclosed, or wages garnished.

Rev 1/2017

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Debtor 1 Leon	Middle Name	Williams Last Name	Case number (if know	n)	
Part 6: Answer These Qu	estions for Reporting Purpose				
16. What kind of debts do you have?	"incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primaril	al primarily for a perso ly business debts? B investment or throug	onal, family, or house usiness debts are deb th the operation of the	ots that you incurred to obtain e business or investment.	
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that No.	er 7. Do you estimate th		operty is excluded and administrative ed creditors?	
18. How many creditors do you estimate that you owe?	☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,0 5,001-10, 10,001-29	000	25,001-50,000 50,001-100,000 More than 100,000	
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000,0 \$50,000,0	01-\$10 million 001-\$50 million 001-\$100 million ,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
^{20.} How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000,0 \$50,000,0	91-\$10 million 901-\$50 million 901-\$100 million 901-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
Part 7: Sign Below					
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
out this document, I have I request relief in accorda I understand making a fal		ained and read the not vith the chapter of titl atement, concealing p case can result in fine	ice required by 11 U. e 11, United States C property, or obtaining	ode, specified in this petition. money or property by fraud in imprisonment for up to 20 years, or a Faulkne	
	Executed on 3/6/2017 MM / D	D / YYYY	Executed o	n3/6/2017 MM / DD / YYYY	

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Fill in this infor	mation to identify your c	ase:	
Debtor 1	Leon	Williams	
	First Name	Middle Name	Last Name
Debtor 2	Theresa		Faulkner
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		Northern	District of Illinois
	•		(State)
Case number [fknown]			

Official Form 106Dec

٦	Check	if	this	is	ar
-	amend	le.	d filir	าต	

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Pa	t t: Sign Below	
	Did you pay or agree to pay someone who is NOT an attorney to	help you fill out bankruptcy forms?
	☑ No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
		Land
	Under penalty of perjury, I declare that I have read the summary	y and schedules filed with this declaration and
	that they are true and correct.	Murian
×		/s/ Theresa Faulkner
	Signature of Debtor	Signature of Debtor 2
	Date 3/6/2017 MM/DD/YYYY	Date 3/6/2017 MM/DD/YYYY

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Debtor 1			Williams	Case number (if known)
and a new respective states	First Name	Middle Name	Last Name	
	ithin 2 years before editors, or other par		d you give a financial staten	nent to anyone about your business? Include all financial institutions
	No Yes. Fill in the det	ails helow		
L	1 105.1 111 111 110 110 110	and Dolow.	Data issued	
			Date issued	
	Name		MM/DD/YYYY	_
	Number Street			
	ramba dida			
	City	State Zip Code		
<u></u>				
Part 12:	Sign Below			
true	and correct. I unde	rstand that making a false	statement, concealing prop	ments, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		re of Debtor 1		Signature of Debtor 2
	Date 3	3/6/2017		Date 3/6/2017
Did :	you attach addition	al pages to Your Statement	of Financial Affairs for Indiv	viduals Filing for Bankruptcy (Official Form 107)?
C	No			
	Yes			
Did :	you pay or agree to	pay someone who is not an	attorney to help you fill out	bankruptcy forms?
V	No			
靣	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice,

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Debtor	Leon		Williams	Case number (if
1	First Name	Middle Name	Last Name	known)
Part 2:	List Your Unexpire	d Personal Property Leas	es	
informa	tion below. Do not list	operty lease that you listed in real estate leases. Unexpired I property lease if the trustee	l leases are leases that a	Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
Des	scribe your unexpired p	personal property leases		Will the lease be assumed?
Les	sor's name:			□ No □ Yes
	scription of leased perty:			
Les	sor's name:		anne ar managarini kan erika e e eta e eta e eta e eta eta eta eta	No Yes
	cription of leased perty:			
Les	sor's name:	A Section of the Sect	n sa an Airea Lucine, CLA Magalago A Manussian an Aireann an Aireann Aireann an Aireann an Aireann an Aireann	☐ No ☐ Yes
	cription of leased perty:	·		
Less	sor's name:			□ No □ Yes
	cription of leased perty:			
Less	sor's name:			□ No □ Yes
	cription of leased perty:			
Less	sor's name:			□ No □ Yes
	cription of leased perty:			
Less	sor's name:		and the second s	□ No □ Yes
	cription of leased perty:	•		
Unde		declare that I have indicated		property of my estate that secures a debt and any personal
•	sty that is subject to a	lem Wille	X /s.	Theresa Faulkner
Sig	gnature of Debtor 1		Sign	ature of Debtor 2
Da	ate 3/6/2017 MM/DD/YYYY		Date	3/6/2017 MM/DD/YYYY

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

in re:	Williams, Leon , Faulkiter, Theresa	Case No	
	Debtor(s)		
		Chapter.	Chapter7
	VERIFICA	TION OF CREDITOR MA	TRIX
TI knowledge	he above named Debtors hereby verify the.	nat the attached list of creditors is	true and correct to the best of their
Date:	3/6/2017	/s/ Williams, Le Williams, Leon	on Leon Wille
		Signature of De	Musing And
		/s/ Faulkner, Th Faulkner, There Sianature of Jo	isa .

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Debtor 1 Leon First Name	Middle Name	Williams	Case numbe	r (if known)		
rirst Name	Middle Name	Last Name	Column A Debtor 1	Deb	mn B tor 2 or -filing spouse	
8. Unemployment compensation Do not enter the amount if you under the Social Security Act. In	contend that the amount re	eceived was a benefit	\$0.00	\$ <u>0.0</u>	0	
For you For your spouse		\$0.00 \$0.00				
9.Pension or retirement income benefit under the Social Security		unt received that was a	\$0.00	\$ <u>0.0</u>	0	
10.Income from all other source amount. Do not include any ber payments received as a victim of international or domestic terroris page and put the total below.	nefits received under the So f a war crime, a crime again	cial Security Act or st humanity, or				
Other Government Assistance			\$0.00	\$ <u>357</u>	' .00	
Total amounts from separate pa	ges, if any.		+\$0.00	+ <u>\$0.</u>	00	
11. Calculate your total current each	monthly income. Add line	es 2 through 10 for	\$5,282.38	+ \$35	7.00	\$5,639.38
column. Then add the total fo	r Column A to the total for	Column B.			·	
						Total current monthly income
Part 2: Determine Whether						
 Calculate your current month Copy your total current month 		ollow these steps:		Copy line 11 h	ere 🛶	\$5,639.38
Multiply by 12 (the number	r of months in a year).					X 12
12b. The result is your annual in		rm.			12b.	\$67,672.56
13 Calculate the median family i	ncome that applies to yo	u. Follow these steps:				
Fill in the state in which you live.	Contraction of the Contraction o	Illinois				
Fill in the number of people in ye	our household.	3 	<u>.</u>			•
Fill in the median family income household.	for your state and size of				13.	\$75,454.00
To find a list of applicable media instructions for this form. This list. 14. How do the lines compare?						
•	r equal to line 13. On the to	op of page 1, check bo	x 1, There is no presumpti	on of abuse.		
14b. Line 12b is more than Go to Part 3 and fill ou	line 13. On the top of page t Form 122A-2.	e 1, check box 2, The p	presumption of abuse is de	termined by Fo	orm 122A-2.	
Part 3: Sign Below	* .		1			
By signing here, I declare unde	r penalty of perjury that the	information on this sta	tement and in any attachm	ents is true and	d correct.	dhur
/s/ Leon Williams Signature of Debtor	en Willer	<u>_</u>	/s/ Theresa Faulkner	JWO	JM	-
Date 3/6/2017			Date 3/6/2017			
MM/DD/YYYY			MM/DD/YYYY			
If you checked line 14a, do N	OT fill out or file Form 122					